PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

106:18907

			SMALL ENTITY			OTHER						
TO	TAL CLAIMS		(Column 1)		(Column 2)			RATE FEE		OR I I	SMALL	
							 				RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BA	SIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			ろ8 minus 20=		* 18		>	(\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		*		7	X42≃		OR	X84≃	
MU	LTIPLE DEPEN	RESENT	ESENT			+	140=	-	OR	+280=		
* If	the difference	in column 1 is	less than ze	ero, enter "0" in column 2			<u> </u>	OTAL		ļi	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
_		(Column 1)	(Colum					MALL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=)	(\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	>	< 42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+	140=		OR	+280=	
1 21 2.7								TOTAL		ارا	TOTAL	
(Column 1) (Column 2) (Column 3)								OIT. FEE		1011	ADDIT. FEE	
	سخف	(Column 1) CLAIMS		HIGH		(Column 3)	-		ADDI	1		ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=)	(\$ 9=		OR	X\$18≂	
	Independent	*	Minus	***		=		(42=		OR	X84=	-
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		-				000	÷
								140=		OR	+280=	
			ADE	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE					
	(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=)	(\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		<42=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		T CLAIM	CLAIM .				OR		
* If the entry in column 1 is lose than the entry in column 2 with "O" in column 2								140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
· ***		ımber Previously P nber Previously Pa							propriate bo			